



Texas Department of Health

Emergency Medical Services and Trauma Care System Account

FY01 - Policies

March 7, 2000

GENERAL

Because of the complex nature of EMS in Texas and the lack of statutory responsibility on the part of any geo-political entities to provide EMS to their population, the bureau may grant an exception to any of these policies based on specific circumstances.

Funds will not be disbursed to counties that do not submit a report from the previous year until the complete report is submitted. Additionally, EMS providers that do not submit a report from the previous year will not be eligible for funds in the current year until the report is received. If a report is received after **8/1/00**, FY 01 funds may not be available to the county/EMS provider.

EMS/RAC ALLOTMENTS

Regional Registries

It is expected that RAC regional registries will submit at least the essential data set to the state trauma registry for each provider submitting data.

EMS Eligibility

In order to be eligible for funds, EMS providers must meet the eligibility requirements as follows:

1. Be a licensed EMS provider that provides **emergency 911 or emergency transfer services** (verified by the regional EMS staff);
2. Upload to the Texas Trauma Registry (may be via RAC Registry) at least 4 times between January 1, 1999 and June 1, 2000. (verified by the Texas Trauma Registry staff);
3. Meet the participation requirements of the appropriate RAC(s) (verified by each RAC);

4. Submit an affidavit acknowledging use of RAC prehospital triage and bypass protocols by August 1, 2000; and
5. Submit an expenditure report by August 1, 2000 for the previous year's funding, if applicable. This report should be filed through the RAC or the county.
6. Note **B** current rules require participation on System QI. By policy this will not be enforced for FY01, but will become effective in FY02.

RAC Eligibility

To be eligible for funds, RAC must meet the following eligibility requirements:

1. Be recognized by the department;
2. Have an approved Trauma System Plan, including completing any contingency-approved components. Note **B** pending rule adoption of 157.123, prevention and regional treatment protocols components will be required for FY02 RAC eligibility.
3. **Minimum upload requirements; 40% of hospitals and EMS providers**
4. **Provide documentation that the RAC has conducted at least one system PI meeting between January 1, 1999 to June 1, 2000.**

Distribution Plan for EMS/Trauma System Care Account

If a 501c3 RAC plans to distribute each county's funds for EMS providers, a distribution plan must be submitted by 501c3 RACs before funds will be released. To evaluate the appropriateness of the RAC plan, the following factors will be considered:

- Demonstrated equality to all providers, preferably acknowledging for varied size, volume of service areas **and/or providers needs**.
- Evidence of a consensus opinion of affected entities.

It is the intention of the Bureau to not alter any RAC's distribution plan in light of their planning meeting the above considerations.

Proposed Budget for RAC System Account

If a 501c3 RAC chooses to contract with the state for the RAC's portion of the funds, a proposed budget must be submitted before funds will be released. If the RAC is also submitting a proposal for the Regional EMS/Trauma System Grants and the budget submitted for that proposal is inclusive of these funds, that budget will meet this requirement. To evaluate the appropriateness of the intended use of the RAC portion of the EMS & Trauma Care System Account, the RAC budget will be reviewed considering the following factors:

- _ Accounts for all Systems Account funds received by the RAC;
- _ Must not include any ineligible expenses;
- _ Use of appropriate RAC mechanism for budgetary planning must be available upon request (i.e. meeting minutes of the executive board or committee with budgetary authority per the bylaws);
- _ Program areas receiving funds must be identified by category, however, a detailed, line-item breakdown within these categories is not required; and
- _ Amendments to the budget are allowable based on current RAC needs.

Eligibility of EMS Providers Participating on Other than their Aligned RAC

If an EMS provider is licensed in or contracted to provide emergency medical services in a county that is contiguous with a neighboring TSA, that EMS provider may participate on either the RAC for the TSA of their county, or the RAC for the neighboring TSA. Participation on both RACs is encouraged (RAC participation should also include following patient referral patterns).

If an EMS provider is contracted to provide emergency medical services within a county of any one TSA, and their provider license reflects another county not in or contiguous with that TSA, that provider must be an active member of the RAC for the TSA of their contracted service area and meet that RAC's definition of participation.

Eligibility of EMS Providers in Counties Other than their County of Licensure

Providers seeking funds for services provided to counties or partial counties other than the one in which they are licensed must be able to provide proof that they have a contract with those counties or a letter from the county acknowledging that the organization routinely provides emergency medical services in that jurisdiction. The contracts or letters must be dated prior to 8/1/00 and be effective through FY01.

Contracts or letters of agreement must, at a minimum:

1. indicate that the EMS provider is providing emergency 911 or emergency transfer services for the specific county;
2. be on letterhead of either the county or the provider;
3. have an ending date;
4. be signed by both parties;
5. be notarized; and
6. have endorsement of the county commissioners court.

Air Ambulance Providers must meet the same requirements as ground transport EMS Providers in order to be eligible to receive funds from a specific county other than the county in which they are licensed (i.e. a contract or letter of agreement with that county to provide emergency scene response or emergency transfers which must have been in effect prior to 8/1/00 and be effective through FY01).

Eligibility of EMS Providers Licensed in Geo-political Sub-divisions that Cross County Lines

EMS providers with geo-political sub-divisions whose borders cross county lines and EMS providers who have contracts with those geo-political sub-divisions may be eligible for funding in all involved counties. The following instances will be considered eligible in every county which contains the geo-political borders in question:

- \$ Municipal emergency medical services providers.
- \$ Any provider whose services are defined using School District Boundaries
- \$ Any provider that services is defined using Emergency Service District (ESD) Boundaries
- \$ Any provider that services is defined using Hospital Boundaries
- \$ Any provider that services is defined using Utility Boundaries
- \$ Any provider that services is defined using Prison Boundaries
- \$ Services not meeting the above, and whose routine service is provided in more than one county will be evaluated on a case to case basis.

APooling@ of EMS funds

EMS providers may choose to APool@ or contribute funds for a RAC specified purpose. To establish a reasonable audit trail, the providers should be given a receipt from the RAC indicating the purpose of the pooled funds (i.e. training program, regional registry, etc.). The report back to the county should also reflect this information. Words like Adonated@ to the RAC should be avoided. **Funds for classes, conferences, and seminars ,must still be expended by the RAC with services rendered by August 31, 2000**

UNCOMPENSATED CARE ALLOTMENT

Disbursement of this allotment is based on a competitive process. All designated trauma facilities will have an opportunity to submit a proposal. Proposals may be evaluated based on, but not limited to, completeness; need; amount of uncompensated trauma care; impact of uncompensated trauma care on the facility; and participation in the trauma system, including the state trauma registry. Contracts will be developed with successful applicants to reimburse a portion of the uncompensated trauma care delivered during the timeframe of May 1, 2001 to August 31, 2001. Minimum funding level will be \$2,500.

EXTRAORDINARY EMERGENCY ALLOTMENT

Proposals for the current fiscal year will be accepted anytime from September 1, 2000 up to June 31, 2001. Proposals received after that date each year will be considered for funding in the next fiscal year.

Proposals will be evaluated based on impact to the regional or statewide EMS/Trauma System. Input from the TDH regional EMS personnel will be strongly considered.

All applicants will receive notification that, if they are not funded immediately, their proposal will be reconsidered at the end of the fiscal year if funding is still available. All applicants that are not funded will receive notification at the end of the fiscal year.

Proposals that are not considered to be an emergency will be provided with other potential sources of funding.

(Last revision March 21, 2000)